

FEC FORM 2
STATEMENT OF CANDIDACY

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| | | |
|---|---|--|
| 1. (a) Name of Candidate (in full) <u>Calen Dean Cristiani</u> | | 2. FEC Candidate Identification Number <u>C00633586</u> |
| (b) Address (number and street) <u>913 70th dr East</u> | | 3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A) |
| (c) City, State, and ZIP Code <u>Sarasota FL 34243</u> | | |
| 4. Party Affiliation <u>Democratic</u> | 5. Office Sought <u>16th Congressional</u> | 6. State & District of Candidate <u>Florida, 16th</u> |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

27. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 election(s).
(year of election)
NOTE: This designation should be filed with the appropriate office listed in the instructions.

| |
|--|
| (a) Name of Committee (in full) <u>Cristiani for Congress</u> |
| (b) Address (number and street) <u>913 70th dr East</u> |
| (c) City, State, and ZIP Code <u>Sarasota FL 34243</u> |

DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)

28. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.
NOTE: This designation should be filed with the principal campaign committee.

| |
|---------------------------------|
| (a) Name of Committee (in full) |
| (b) Address (number and street) |
| (c) City, State, and ZIP Code |

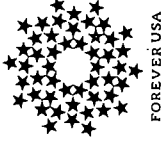
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

| | |
|--|-------------------------|
| Signature of Candidate <u>Calen Cristiani</u> | Date <u>3/1/2017</u> |
|--|-------------------------|

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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Calen Cristian,
913 70th dr. East
Sarasota FL 34243



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(3/2015)

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